



State of New Hampshire
Department of Health and Human Services
Office of Operations Support
Licensing and Regulation Services
129 Pleasant Street
Concord NH 03301-3857
TDD Access: Relay NH 1-800-735-2964
In NH 1-800-852-3345, EXT 5127
603-271-0277

Massage Therapist Licensure Application

Initial Application

PLEASE PRINT

FOR DEPARTMENT USE ONLY

☐ \$125.00 Fee/Check # _____

Practical: **PASS** **FAIL**

☐ **New** ☐ **Reciprocity**

Effective Dates:

License Number:

Last Name		First Name		Middle Initial
Date of Birth	Daytime Phone	E-Mail Address		
/ /	() -			

Home Address	City	State	Zip
<input type="checkbox"/> Check here if you do NOT want your home address disclosed to individuals, trade organizations, or schools for the sole purpose of advertising continuing education opportunities.			

Mailing Address	City	State	Zip

Massage School – Name/address (Attach Official Transcript)		City	State	Zip
Date of Graduation	Total # Hours			

Other professional licenses (excluding driver's license)	State issued:	Expiration:
Profession:		
Profession:		
Profession:		

☐ Request Reciprocity waiver of practical exam

Date satisfactorily completed NCETMB (Massage and Bodywork)	Date satisfactorily completed CPR course	Date satisfactorily completed First Aid Course

Have you been convicted of any sexually-related crime or crime involving moral turpitude (last 10 years)? ☐ No ☐ Yes (Explain)

Are you in good mental and physical health? ☐ Yes ☐ No (Explain)

The Department of Health and Human Services is required by law to ask for your social security number. The number will be held confidential by the Department and used only for enforcement of the laws governing child support. (42 USC 666(a)(13); RSA 161-B:11)

Social Security Number: _____ - _____ - _____

"By my signature I attest full compliance with RSA 328-B and all corresponding New Hampshire regulations and that the information and documentation provided is accurate to the best of my knowledge. I understand that knowingly providing false information may be grounds for denial, suspension, and or revocation of a license."

DATE

SIGNATURE

Documentation to be Submitted with Application for INITIAL License

All material must be received by the deadline listed below. Note that the deadline for applicants who attended massage school outside of New Hampshire is 5 days earlier than the deadline for applicants who attended a New Hampshire massage school. Applicants who submit late applications, or applications that remain incomplete on the deadline, will not be scheduled for the practical examination to be held the following month. All of the requirements listed in 1 – 7 below must be fulfilled by the deadline. **No exceptions will be made.** It is in your best interest to submit your application at least five days prior to your particular deadline so that you may have time to make corrections or submit additional requested information if necessary, as additional time beyond the deadline will not be provided. If you have any questions while completing this application, please do not hesitate to call our office at 603-271-0853 for assistance. Mail or deliver application and materials to the address on the front of this application.

1. A recent photograph of yourself - 2x2 passport photo.

2. Diploma with name and address of massage school you graduated from.

Photocopied diplomas must be notarized or must have an embossed seal of the massage school you graduated from.

3. Official transcripts from your massage school.

Official transcripts must include course titles, length or number of hours for all courses successfully completed, and an embossed school seal or original signature of a school official. If you attended a massage school out of state, your application must also include a Transcript Review Packet, completed by each massage therapy school you attended. You may contact this office to request a Transcript Review Packet. Please be sure to submit your application by the out-of-state deadline listed below in order to allow time for your Transcript Review Packet to be reviewed and verified.

4. Documentation of current certification from the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB).

IMPORTANT: APPLICANTS MUST HAVE TAKEN THE NCBTMB EXAMINATION THAT COVERS BOTH MASSAGE AND BODYWORK CATEGORIES. THE EXAMINATION THAT ONLY COVERS MASSAGE WILL NOT BE ACCEPTED. Include your **PRELIMINARY CANDIDATE SCORE REPORT (PCSR)** with your application. The PCSR is the form you received on the day of your NCBTMB examination.

5. *Documentation of current certification in Adult CPR. *Photocopies acceptable.*

**American Red Cross, American Heart Association, or National Safety Council.*

6. *Documentation of current certification in First Aid. *Photocopies acceptable.*

**American Red Cross, American Heart Association, or National Safety Council.*

7. License application fee is \$125.

Checks, postal or express money order(s) are to be made payable to: "Treasurer, State of New Hampshire."

Potential practical examination dates (subject to change) are:

DEADLINES

<u>EXAM DATE</u>	(Attended NH School)	(Attended School Out of State)
Thursday, November 20, 2008	Tuesday, October 21, 2008	Thursday, October 16, 2008
Thursday, January 15, 2009	Tuesday, December 16, 2008	Thursday, December 11, 2008
Thursday, March 19, 2009	Tuesday, February 17, 2009	Thursday, February 12, 2009
Thursday, May 21, 2009	Tuesday, April 21, 2009	Thursday, April 16, 2009
Thursday, August 27, 2009	Tuesday, July 28, 2009	Thursday, July 23, 2009
Thursday, November 19, 2009	Tuesday, October 20, 2009	Thursday, October 15, 2009

Reciprocity Application and Waiver of Practical Exam

Application must include all information listed in items 1 - 7 above plus:

1. Verification of licensure and good standing from the state in which you are currently licensed (Send Verification of Good Standing form to the state in which you hold a current massage therapy license. That state will complete the form and forward it to this office);
2. Copy of your current state Massage Therapist license; and
3. Letter requesting a waiver of the practical examination requirement.

Please note that in order for you to apply for a massage therapy license through reciprocity, you must have passed a State-administered practical examination in the state that you are currently licensed.